PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

93/83/c2

Lifective October 1, 2005								丄	4318	<u>, > </u>	(' '	-
		CLAIMS A	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			20			ŀ		TE	FEE	7	RATE	FEE
FOR			. NUMBER	NUMBER FILED .		NUMBER EXTRA		FEE	385.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* @	* 0		9=		OR	X\$18=	
INDEPENDENT CLAIMS			·_ mi	inus 3 =	5	7		3=		OR	X86=	
Μt	JLTIPLE DEPE	NDENT CLAIM P	RESENT				+14	 5=		OR	+290=	
* 11	the difference	e in column 1 is	less than zero, enter "0" in column 2			column 2	TOT		 	OR	TOTAL	223
CLAIMS AS AMENDED - PART II										2	OTHER	THAN
		(Column 1)		(Colum		(Column 3)	SMA	LL F	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	}=		OR	X\$18=	
	Independent	*	Minus	***	CL AINA	=	X43	=.		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	5=		OR	+290=	
M								TAL		, L	TOTAL	
(Column 1) (Column 2) (Column 3)								FEE		J ,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	EST BER JUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X43	_		OR	X86=	
	FIRST PHESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM	. ,	+145	_		OR	+290=	
•							TO ADDIT. F	TAL		_ L	TOTAL	
(Column 1) (Column 2) (Column 3)								EE L		О д	ADDIT. FEE	
	`	CLAIMS		HIGHE	ST	(Column 3)		<u> </u>	1001	r	 -	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	USLY	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** :		=	X\$ 9			OR	X\$18=	
	Independent		Minus	***		=	X43=			ı	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						7,40	#		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								=	(OR	+290=	
***!	f the "Highest Nur f the "Highest Nur	mber Previously Pai mber Previously Pai nber Previously Paid	id For" IN THIS iid For" IN THIS	SPACE is I	less than	1 20, enter "20." 1 3. enter "3."	ADDII. I	EE L			TOTAL DDIT. FEE Imn 1.	